

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90059 014 ****61.25

DOCUMENT # N05703

1. Entity Name

INLET COVE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

1111 GEORGE BUSH BLVD.
DELRAY BEACH FL 33483

Mailing Address

P.O. BOX 639
DELRAY BEACH FL 33447-0639

20011438



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

60 Venetian Drive

City & State

City & State

Delray Beach, FL

Zip

Country

Zip

Country

33403

Palm Beach

4. FEI Number

65-0076383

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SERGIO'S PROPERTY MANAGEMENT, INC.
60 VENETIAN DR.
WEST PALM BEACH FL 33403**

Delray Beach, FL 33403

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	LAPORTE, ROLAND	
STREET ADDRESS	1111 GEORGE BUSH BLVD., UNIT G.	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	KENNEY, ROBERT	
STREET ADDRESS	1111 GEORGE BUSH BLVD., UNIT B	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	S.	<input type="checkbox"/> Delete
NAME	LAPORTE, LEA	
STREET ADDRESS	1111 GEORGE BUSH BLVD UNIT G	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	SERGIO, JOHN H	
STREET ADDRESS	60 VENETIAN DR.	
CITY-ST-ZIP	WEST PALM BEACH FL 33403	
TITLE	D	<input type="checkbox"/> Delete
NAME	SINGER, KENNETH	
STREET ADDRESS	1111 GEORGE BUSH BLVD UNIT L	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	D	<input type="checkbox"/> Delete
NAME	KEEHN, STEPHEN	
STREET ADDRESS	1111 GEORGE BUSH BLVD., UNIT H	
CITY-ST-ZIP	DELRAY BCH. FL 33483	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Viau, David	
STREET ADDRESS	1111 George Bush Blvd. Unit E	
CITY-ST-ZIP	Delray Beach, FL 33483	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Giancola, Margaret	
STREET ADDRESS	1111 George Bush Blvd. Unit D	
CITY-ST-ZIP	Delray Beach, FL 33483	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John H. Sergio, Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 9, 05

Date

561-276-6100

Daytime Phone #